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ABSTRACT

A farmstead community in Northwest Ohio, called Bittersweet Farms, serves as a habilitation program for autistic adults, involving 20 residents ranging from profoundly retarded to high functioning and 15 developmentally delayed adults who are part of an agricultural day program. The community is designated as an Intermediate Care Facility for the Mentally Retarded, allowing residents to be supported by state Medicaid funds. Residents are provided opportunities to learn all tasks associated with housekeeping, cooking, animal care, farming, horticulture, and woodworking. Skills training emphasizes task analysis and carefully programmed teaching using positive reinforcement. The director and staff provide daily programming for the residents while consulting professionals (including the Behavior Management Team and the speech and language consultant) meet regularly to consider special issues. This paper describes farm activities, social life of residents, staffing, methods of encouraging social interaction, and training methods. (11 references) (JDD)

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Farm-Life Skills Training of Autistic Adults at Bittersweet Farms

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FARM-LIFE SKILLS TRAINING OF AUTISTIC ADULTS AT BITTERSWEET FARMS

Many wonder what becomes of autistic children when they grow up. With their array of cognitive, social and communicative deficits, what kind of life can they lead? Where can they live? There are as many as 4.5 autistic children born for every 10,000 births, there are nearly 100,000 individuals with autism in our country today. The number triples if we consider all those with "autistic-like" symptoms.

For those concerned about autistic adults, it is disheartening to see how little has been done to provide for their continuing care and education. State institutions for the mentally retarded where autistic adults were once warehoused, have been systematically emptied over the last 15 years, and public schools terminate their special classes by age 22. Now, many autistic adults remain at home with aging parents who have real concerns about their own longevity and their ability to provide continuing care.

Some efforts have been made in urban settings to create group homes and supervised apartments (Salzano, 1991). There are job counselors provided who accompany autistic adults to an employment setting and coach on site until the job has been mastered. Other autistic adults are harbored in regional facilities for the mentally retarded and attend traditional sheltered workshops each day.

The debate rages in the field about the best option for this

long neglected population, and many questions have yet to be answered: What degree of "normalization" makes sense (Mesibov, 1990)? How much mainstreaming is useful for these people? How much leaves them still isolated as they fail to keep up the pace required in a busy world? Research needs to be done to determine which techniques and models work best, and funds obtained to support new ventures.

It's time to take a pracical look at the lives of autistic adults and share a view of what Dr. Bernard Rimland (1991) has called the "neglected alternative". A farmstead habilitation community called Bittersweet Farms. It is the first such setting in this country and represents an important evolution in the history of the care and education of this population (Kay,1991). Admissions requirements specify that all residents be mobile and able to participate to some degree in the activities of the community.

There are now 20 residents ranging from profoundly retarded to high functioning. They're joined by another 15 developmentally delayed adults who are part of the agricultural day-program. The residents live and productively work on 80 acres of forest and farmland 23 miles from the city of Toledo in Northwest Ohio. The community is designated as an Intermediate Care Facility for the Mentally Retarded (ICF-MR), allowing residents to be supported by state Medicaid funds. The program is run as a non-profit corporation headed by a Board of Trustees. The setting features a main house for 15 residents and a co-op house for the higher functioning 5 adults. Other buildings spread over the grounds

include a barn, woodshop, horticulture center with greenhouses, and a front house where residents serve high tea to the public every Thursday afternoon.

Beyond these buildings is the rural town of Whitehouse, Ohio where residents go to get haircuts, eat in restaurants, shop in stores and sell plants outside the market. Further away is the city of Toledo where they attend concerts, run in marathons, or entertain at special events with their own handbell choir. Citizens from nearby towns and cities come to Bittersweet to tour, have tea, buy flowers or Christmas trees, and attend the annual Harvest Festival. Through all these encounters, important social skills can be learned and practiced within and beyond the property.

The farm is a busy and productive place - but one experiences the pace as slow, methodical and unhurried. There is intensive staff support. One staff to every 2-3 residents, as residents are provided opportunities to learn all tasks associated with housekeeping, cooking, animal care, farming, horticulture and woodworking. The philosophy of the Founding Director, Bettye Ruth Kay (1991), is that supportive staff, working in partnership with each resident, offer opportunities for interdependence - an antidote for the autistic individuals' tendencies toward isolation. Highly structured programming provides predictability as well supervised activities are planned around the clock and around the year. In each work setting, Farm Life Skills Training (Collins & LeFevre-Mitchell, 1991) emphasizes task analysis and carefully programmed teaching using positive reinforcement. Real and important jobs are carried out, as all tasks are broken down into

manageable steps. Some residents require hand-over-hand demonstration while others can learn through imitation; but in all cases focus is on encouraging gradual independence in carrying out each routine.

Recreational opportunities abound as residents bike, jog, swim, enjoy winter skiing, weave on harness looms and play in the handbell choir. Each Saturday there's a now expected 10 mile hike and sometimes they just gather and sing to the accompaniment of guitars. Quite a healthful and hearty life style!

The Director and staff provide daily programming for the residents while a team of consulting professionals meets regularly to consider special issues. The Behavior Management Team (Karst, Mitch & Koch, 1991) tracks problems of agitation, depression, sleeplessness, aggression and destruction all of which occur from time-to-time. Psychiatrist, psychologist, social worker, nurse and case managers try to understand what causes and perpetuates these disturbances and then devise behavioral interventions. Medication options are available if needed and are frequently useful. They're administered cautiously, however, and systematically reduced over time.

The Speech and Language Consultant (Giddan, 1991) is an important part of the treatment team since communication is such a major problem for autistic adults.

As we know (see Shopler & Mesibov, 1985; Layton, 1987):

- Semantic systems are deficient and overly concrete
- Syntax is often insufficient to explain or describe events or experiences

- Perservation limits the course of any interaction
- Echolalia generally indicates limited understanding of what has been said or lack of available response
- Pragmatic skills are deficient in all cases, for limited social understanding is the hallmark of autism

The Speech and Language Pathologist needs to assess each resident's communication skills in individual and in functional contexts. Carefully designed programs will advance needed skills slowly and gradually with the support of all the people in that setting. It isn't a simple task; but progress is possible.

Extensive staff training is required. It's easy to work alongside autistic adults and be very quiet. It's effortful to keep a conversation going when no response is forthcoming. We're all tempted to fill in if the delay in response is too long or answer questions that are unanswered. We sometimes do a lot of the talking, most of the initiating and we ask a lot of questions just to keep things going.

To heighten staff awareness of these issues, video taped samples are analyzed. Staff watching themselves and the residents, observe eye contact, facial expression, body positioning, hand movements and gestures, and pacing during communication exchanges. They count turn-taking in conversation and track topic maintenance. Together with the Speech and Language Pathologist they generate ideas to enhance these pragmatic cues.

Last week I observed a conversation of a young man who uttered only disconnected phrases when he first began. Barb held his hands and stood very still quite close to him. She was riveted to his

eyes and kept the interaction going. She reflected part of what he said then commented on the topic herself with a personal reaction. Then asked a question until they had determined what he would be doing after lunch. The pace of the interchange was slow; tailored to his pace. She used short sentences, redundancy, simple vocabulary and they ended when both agreed to terminate. She summarized then. "OK Don"? "OK" A remarkable improvement for him.

Autistic adults rarely talk to each other. But now that residents have mastered certain tasks in the horticulture center peer teaching is being encouraged. We are now seeing some individuals productively talking as they demonstrate to a peer.

An organized social interaction group supported by staff offers a forum where residents can share mutual problems or plan simple activities. At such a meeting two young men who had been competing for the newspaper each night, worked out a plan to alternate evenings so that each would have a turn at reading it first.

Vocabulary is continually learned in each setting and practiced in game formats so residents can name, for example, all the plants, fruits and vegetables they grow in the garden as well as the tools they use in the process.

Visual cueing is used extensively to enhance learning and communication experiences.

- Printed scripts for those who read so they know what to say when greeting visitors at the tea houses and taking their orders, or how to order a book at the library.
- Written lists are used for personal schedules or for

recipes

- Written notes are delivered from person to person.

For those who can't read, picture sequences are hung on rings or posted on charts. (Foster & Giddan, 1975) These displays help guide activities of daily living and encourage independence. Similar cues are effective for housekeeping tasks as well.

Photo displays are even more vivid guides and work well as references in a wide variety of sequencing tasks from planting flowers to baking bread. A fine example is the photo sequence of Billy as he brushes and prepares the horse, saddles and bridles it, and eventually rides it around the coral. The eight pictures are displayed on a cardboard strip and available for Billy's reference as he goes through the steps. In two months time he has learned the entire routine and can carry out the task on his own, much to his and the staff's delight. This is a young man who was quite agitated, self-abusive and disorganized when he arrived one year ago.

Unique programs are integrated in special cases such as sign language for the deaf autistic young man and the mute young woman, and an augmentative communication device for the apraxic young man. Since he began using the The Introtalker (Prentke-Romich, 1988) six months ago, staff have documented a significant decease in Fred's aggressive outbursts. I have seen him move from using simple button messages in selected contexts to his first 3 button series when he was clearly upset about not being able to go to early lunch with another group. He pushed "No" I feel mad" "I want more".

We discovered Paul keeps himself going on a job by chanting

"I'm drying the dish I'm drying the dish" where he otherwise always needed someone to tell him to keep going. Matthew who is extremely distractible can chant "dig and dump" as he fills the flower bed with dirt. Carl's latency of response is dramatically reduced if one says "tell me" as part of a question. "What kind of cookies are you baking for lunch?" "Tell, me Carl." Inroads are made into Alvin's rigidity and inflexibility. He's very routine bound and treasures his schedule, so we schedule in some variations: 10:30 "You will do a new job now, ask Shelly" or "You may choose a slip from the "new job" jar.

Bittersweet Farms, as you can see, is a community that fosters and enhances all aspects of the lives of the people who live there. The setting, the program, the staff are all focused on expanding the world view and range of experience of these autistic adults. - the lucky ones. In the seven years it has been open we have witnessed dramatic changes in many of the residents. Change happens slowly, and very gradually; a product of the humane and nurturing environment with its sustained attention to small obtainable goals.

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